

Änderung der Anmeldung für die Schulkindbetreuung an der Grundschule Hochdorf



Bei nachträglichen Änderungen in der Anmeldung müssen mindestens die roten Felder ausgefüllt sein.

Child

— . — . —

**Diese Änderung/Neuanmeldung soll am
dd.mm.yyyy in Kraft treten :**

Firstname:

Lastname:

Year:

Date of Birth:

School form:

☐

Halbttag

☐

Ganzttag

**My child is vaccinated against measles / already
immune:**

☐

Ja

Allergies:

Medications:

Please mark with a cross where applicable:

☐

My child is gluten intolerant

☐

My child is lactose intolerant

☐

My child doesn't eat pork

☐

My child is a vegetarian

☐

After the end of the booked care, my child
is allowed to go home alone

☐

My child is allowed to take part in
excursions

☐

My child can be creamed in the summer
with available sunscreen

☐

Photos showing my child may be
published in the public press as well as
used for public relations of the
supervising organizations.

☐

Betreuer dürfen bei meinem Kind Zecken
entfernen

Grundschule Hochdorf - Half-day

Monday

Tuesday

Wednesday

Thursday

Friday

12:00 - 13:00 (Mittagessen) ☐ book	12:00 - 13:00 (Mittagessen) ☐ book	12:00 - 13:00 (Mittagessen) ☐ book	12:00 - 13:00 (Mittagessen) ☐ book	12:00 - 13:00 (Mittagessen) ☐ book
12:15 - 13:30 ☐ book	12:15 - 13:30 ☐ book	12:15 - 13:30 ☐ book	12:15 - 13:30 ☐ book	12:15 - 13:30 ☐ book
12:15 - 15:00	12:15 - 15:00	12:15 - 15:00	12:15 - 15:00	12:15 - 15:00

Monday	Tuesday	Wednesday	Thursday	Friday
☐ book	☐ book	☐ book	☐ book	☐ book
13:00 - 15:00	13:00 - 15:00	13:00 - 15:00	13:00 - 15:00	13:00 - 15:00
☐ book	☐ book	☐ book	☐ book	☐ book

Parent or legal guardian

E-mail:

Phone number:

Firstname:

Lastname:

Street:

Address suffix:

Postcode:

City:

I have at least one other child in a paid public kindergarten :

☐ Yes
☐ No

If yes, enter the name of the fee-paying kindergarten here :

Employment situation of parent or legal guardian:

- ☐ Single parent / legal guardian is working
☐ Single parent / legal guardian is a job-seeker
☐ Both parents / legal guardians are working
☐ Both parents / legal guardians are job-seekers
☐ One parent / legal guardian is working another is a job-seeker

I am a single parent or legal guardian:

☐ Yes
☐ No

Name of the emergency contact:

Telephone number for possible emergencies:

Other persons entitled to pick-up:

Sibling 1:

Firstname:

Lastname:

Date of birth:

Sibling 2:

Firstname:

Lastname:

Date of birth:

Sibling 3:

Firstname:

Lastname:

Date of birth:

Account holder:

IBAN:

BIC:

☐

I have read and accept the general terms and conditions of the Stadtverwaltung Remseck am Neckar for school childcare.

☐

I understand that my registration can be recalled by the organization if the care capacities are exceeded. There is no right to receive care.

☐

I have read the privacy policy of Stadtverwaltung Remseck am Neckar and agree that my data and the data of my children are electronically processed and passed on to the supervising organisation.

Datum	Unterschrift